

#### New York State Board for Professional Medical Conduct

433 River Street, Suite 303 • Troy, New York 12180-2299 • (518) 402-0863

Richard F. Daines, M.D.
Commissioner
NYS Department of Health
James W. Clyne, Jr.
Executive Deputy Commissioner
Keith W. Servis, Director
Office of Professional Medical Conduct



Kendrick A. Sears, M.D.
Chair
Carmela Torrelli
Vice Chair
Katherine A. Hawkins, M.D., J.D.
Executive Secretary

May 24, 2010

#### CERTIFIED MAIL-RETURN RECEIPT REQUESTED

Aart Geurtsen, M.D.

REDACTED

Re: License No. 147872

Dear Dr. Geurtsen:

Enclosed is a copy of BPMC #10-86 of the New York State Board for Professional Medical Conduct. This order and any penalty provided therein goes into effect May 31, 2010.

Sincerely,

REDACTED

Katherine A. Hawkins, M.D., J.D. Executive Secretary Board for Professional Medical Conduct

#### Enclosure

cc:

Andrew Knoll, M.D., J.D.

Scolaro, Shulman, Cohen, Fetter & Burstein, P.C.

507 Plum Street, Suite 300 Syracuse, New York 13204

### NEW YORK STATE DEPARTMENT OF HEALTH STATE BOARD FOR PROFESSIONAL MEDICAL CONDUCT

## OF AART GEURTSEN, M.D.

CONSENT ORDER

BPMC #: 10-86

Upon the application of (Respondent) Aart Geurtsen, M.D. in the attached Consent Agreement and Order, which is made a part of this Consent Order, it is

ORDERED, that the Consent Agreement, and its terms, are adopted and it is further

ORDERED, that this Consent Order shall be effective upon issuance by the Board, either

- by mailing of a copy of this Consent Order, either by first class mail to Respondent at the address in the attached Consent Agreement or by certified mail to Respondent's attorney, OR
- upon facsimile transmission to Respondent or Respondent's attorney, whichever is first.

SO ORDERED.

DATE: 05/21/2010

REDACTED

KENDRICK A. SEARS, M.D. Chair State Board for Professional Medical Conduct NEW YORK STATE DEPARTMENT OF HEALTH STATE BOARD FOR PROFESSIONAL MEDICAL CONDUCT

# OF AART GEURTSEN, M.D.

CONSENT
AGREEMENT
AND
ORDER

Aart Geurtsen, M.D., represents that all of the following statements are true:

That on or about October 16, 1981, I was licensed to practice as a physician in the State of New York, and issued License No. 147872 by the New York State Education Department.

My current address is REDACTED

and I will advise the Director of the Office of Professional Medical Conduct of any change of address.

I understand that the New York State Board for Professional Medical Conduct (Board) has charged me with two specifications of professional misconduct.

A copy of the Statement of Charges, marked as Exhibit "A", is attached to and part of this Consent Agreement.

I do not contest the first specification of misconduct as it applies to paragraphs C and G, in full satisfaction of the charges against me, and agree to the following penalty:

- Pursuant to N.Y. Pub. Health Law § 230-a(1), I shall be subject to a Censure and Reprimand.
- Pursuant to Pursuant to N.Y. Pub. Health Law § 230-a(9), I shall be
  placed on probation for a period of thirty-six months, subject to the
  terms set forth in attached Exhibit "B."

I further agree that the Consent Order shall impose the following conditions:

That Respondent shall remain in continuous compliance with all requirements of N.Y. Educ Law § 6502 including but not limited to the requirements that a licensee shall register and continue to be registered with the New York State Education Department (except during periods of actual suspension) and that a licensee shall pay all registration fees. Respondent shall not exercise the option provided in N.Y. Educ. Law § 6502(4) to avoid registration and payment of fees. This condition shall take effect 120 days after the Consent Order's effective date and will continue so long as Respondent remains a licensee in New York State; and

That Respondent shall cooperate fully with the Office of Professional Medical Conduct (OPMC) in its administration and enforcement of this Consent Order and in its investigations of matters concerning Respondent. Respondent shall respond in a timely manner to all OPMC requests for written periodic verification of Respondent's compliance with this Consent Order. Respondent shall meet with a person designated by the Director of OPMC, as directed. Respondent shall respond promptly and provide all documents and information within Respondent's control, as directed. This condition shall take effect upon the Board's issuance of the Consent Order and will continue so long as Respondent remains licensed in New York State.

I stipulate that my failure to comply with any conditions of this Consent Order shall constitute misconduct as defined by N.Y. Educ. Law § 6530(29).

I agree that, if I am charged with professional misconduct in future, this Consent Agreement and Order **shall** be admitted into evidence in that proceeding.

I ask the Board to adopt this Consent Agreement.

I understand that if the Board does not adopt this Consent Agreement, none of its terms shall bind me or constitute an admission of any of the acts of alleged misconduct; this Consent Agreement shall not be used against me in any way and shall be kept in strict confidence; and the Board's denial shall be without prejudice to the pending disciplinary proceeding and the Board's final determination pursuant to N.Y. Pub. Health Law.

I agree that, if the Board adopts this Consent Agreement, the Chair of the Board shall issue a Consent Order in accordance with its terms. I agree that this Consent Order shall take effect upon its issuance by the Board, either by mailing of a copy of the Consent Order by first class mail to me at the address in this Consent Agreement, or to my attorney by certified mail, OR upon facsimile transmission to me or my attorney, whichever is first. The Consent Order, this agreement, and all attached Exhibits shall be public documents, with only patient identities, if any, redacted. As public documents, they may be posted on the Department's website.

I stipulate that the proposed sanction and Consent Order are authorized by N.Y. Pub. Health Law §§ 230 and 230-a, and that the Board and OPMC have the requisite powers to carry out all included terms. I ask the Board to adopt this Consent Agreement of my own free will and not under duress, compulsion or restraint. In consideration of the value to me of the Board's adoption of this Consent Agreement, allowing me to resolve this matter without the various risks and burdens of a hearing on the merits, I knowingly waive my right to contest the

Consent Order for which I apply, whether administratively or judicially, I agree to be bound by the Consent Order, and I ask that the Board adopt this Consent Agreement.

I understand and agree that the attorney for the Department, the Director of OPMC and the Chair of the Board each retain complete discretion either to enter into the proposed agreement and Consent Order, based upon my application, or to decline to do so. I further understand and agree that no prior or separate written or oral communication can limit that discretion.

DATE 5/11/2010

REDACTED

AART GEURTSEN, M.D. RESPONDENT The undersigned agree to Respondent's attached Consent Agreement and to its proposed penalty, terms and conditions.

DATE: 5/11/10

REDACTED

ANDREW M. KNOLL, M.D., J.D. Attorney for Respondent

DATE: 5/13/10

REDACTED

VALERIE B. DONOVAN Associate Counsel Bureau of Professional Medical Conduct

DATE: May 21, 2010

REDACTED

KEITH W. SERVIS
Director
Office of Professional Medical Conduct

#### **EXHIBIT "A"**

NEW YORK STATE DEPARTMENT OF HEALTH STATE BOARD FOR PROFESSIONAL MEDICAL CONDUCT

#### IN THE MATTER

OF

AART GEURTSEN, M.D.

STATEMENT OF CHARGES

Aart Geurtsen, M.D., the Respondent, was authorized to practice medicine in New York State on or about October 16, 1981, by the issuance of license number 147872 by the New York State Education Department.

#### **FACTUAL ALLEGATIONS**

- A. From in or around September 2003 through in or around September 2008, Respondent provided medical care at Family Care Medical Group (FCMG), Marcellus, New York, to Patient A (patients are identified in Appendix A attached). Respondent's treatment and/or care of Patient A did not meet minimally acceptable standards in that:
  - Respondent failed to adequately treat Patient A's hypertriglyceridemia and/or Patient A's metabolic syndrome.
  - Respondent inappropriately delayed referral of Patient A for a psychiatric consult.
  - Respondent failed to adequately communicate with a clinic that was treating Patient A.
  - Respondent failed to maintain an adequate medical record for Patient A.
- B. From in or around 1996 through in or around 2008, Respondent provided medical care at FCMG to Patient B. Respondent's treatment and/or care of Patient B did not meet minimally acceptable standards in that from in or

around October 2006 through March 2008, Respondent failed to appropriately coordinate his care and treatment with Patient B's pain management specialist and failed to appropriately refer Patient B for a neurological and/or psychiatric consult.

- C. From in or around May 2007 through in or around March 2008, Respondent provided medical care at FCMG to Patient C. Respondent's treatment and/or care of Patient C did not meet minimally acceptable standards in that Respondent failed to refer Patient C for a pain management consult and/or failed to maintain an adequate medical record for Patient C.
- D. From in or around February 2004 through in or around July 2008, Respondent provided medical care at FCMG to Patient D. Respondent's treatment and/or care of Patient D did not meet minimally acceptable standards in that Respondent failed to order a psychiatric or cognitive behavioral therapy consult for Patient D, and/or failed to maintain an adequate medical record for Patient D.
- E. From in or around October 1986 through in or around January 2008, Respondent provided medical care at FCMG to Patient E. Respondent's treatment and/or care of Patient E did not meet minimally acceptable standards in that Respondent re-introduced medications to which Patient E was noted to be allergic without discussing the risks and benefits with Patient E, and/or failed to maintain an adequate medical record for Patient E.
- F. From in or around May 2001 through in or around August 2008, Respondent provided medical care at FCMG to Patient F. Respondent's treatment

and/or care of Patient F did not meet minimally acceptable standards in that Respondent failed to appropriately evaluate Patient F and/or failed to request a cardiology consult for Patient F.

G. From in or around May 2005 through in or around July 2008, Respondent provided medical care at FCMG to Patient G. Respondent's treatment and/or care of Patient G did not meet minimally acceptable standards in that Respondent's referral of Patient G for a psychiatric consult was not timely and Respondent failed to maintain an adequate medical record for Patient G.

#### SPECIFICATION OF CHARGES

### FIRST SPECIFICATION NEGLIGENCE ON MORE THAN ONE OCCASION

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law § 6530(3) by practicing the profession of medicine with negligence on more than one occasion as alleged in the following:

1. The facts in Paragraphs A and A.1, A and A.2, A and A.3, A and A.4, B, C, D, E, F and/or G.

## SECOND SPECIFICATION FAILURE TO MAINTAIN RECORDS

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law § 6530(32) by failing to maintain a record for each patient which accurately reflects the care and treatment of the patient, as alleged in the following:

The facts in paragraphs A and A.4, C, D, E and G.

DATE:

April 13, 2010 Albany, New York

REDACTED

PETER D. VAN BUREN
Deputy Counsel
Bureau of Professional Medical Conduct

#### **EXHIBIT "B"**

#### Terms of Probation

- 1. Respondent's conduct shall conform to moral and professional standards of conduct and governing law. Any act of professional misconduct by Respondent as defined by N.Y. Educ. Law §§ 6530 or 6531 shall constitute a violation of probation and may subject Respondent to an action pursuant to N.Y. Pub. Health Law § 230(19).
- Respondent shall maintain active registration of Respondent's license (except during periods of actual suspension) with the New York State Education Department Division of Professional Licensing Services, and shall pay all registration fees.
- 3. Respondent shall provide the Director, Office of Professional Medical Conduct (OPMC), Hedley Park Place, 433 River Street Suite 303, Troy, New York 12180-2299 with the following information, in writing, and ensure that this information is kept current: a full description of Respondent's employment and practice; all professional and residential addresses and telephone numbers within and outside New York State; and all investigations, arrests, charges, convictions or disciplinary actions by any local, state or federal agency, institution or facility. Respondent shall notify OPMC, in writing, within 30 days of any additions to or changes in the required information.
- Respondent shall cooperate fully with, and respond in a timely manner to, OPMC requests to provide written periodic verification of Respondent's compliance with the terms of this Consent Order. Upon the Director of OPMC's request, Respondent shall meet in person with the Director's designee.
- 5. Respondent's failure to pay any monetary penalty by the prescribed date shall subject Respondent to all provisions of law relating to debt collection by New York State, including but not limited to: the imposition of interest, late payment charges and collection fees; referral to the New York State Department of Taxation and Finance for collection; and non-renewal of permits or licenses [Tax Law § 171(27); State Finance Law § 18; CPLR § 5001; Executive Law § 32].
- 6. The probation period shall toll when Respondent is not engaged in active medical practice in New York State for a period of 30 consecutive days or more. Respondent shall notify the Director of OPMC, in writing, if Respondent is not currently engaged in, or intends to leave, active medical practice in New York State for a consecutive 30 day period. Respondent shall then notify the Director again at least 14 days before returning to active practice. Upon Respondent's return to active practice in New York State, the probation period shall resume and Respondent shall fulfill any unfulfilled probation terms and such additional requirements as the Director may impose as reasonably relate to the matters set forth in Exhibit "A" or as are necessary to protect the public health.

- 7. The Director of OPMC may review Respondent's professional performance. This review may include but shall not be limited to: a review of office records, patient records, hospital charts, and/or electronic records; and interviews with or periodic visits with Respondent and staff at practice locations or OPMC offices.
- Respondent shall adhere to federal and state guidelines and professional standards of care with respect to infection control practices. Respondent shall ensure education, training and oversight of all office personnel involved in medical care, with respect to these practices.
- Respondent shall maintain complete and legible medical records that accurately reflect the evaluation and treatment of patients and contain all information required by State rules and regulations concerning controlled substances.
- 10. Respondent shall enroll in and complete a continuing education program in the areas of treatment of chronic pain, and treatment of psychiatric problems encountered by family practitioners. The continuing education program is subject to the Director of OPMC's prior written approval and shall be completed within the first 90 days of the probation period.
- 11. Within thirty days of the Consent Order's effective date, Respondent shall practice medicine only when monitored by a licensed physician, board certified in an appropriate specialty, ("practice monitor") proposed by Respondent and subject to the written approval of the Director of OPMC. Any medical practice in violation of this term shall constitute the unauthorized practice of medicine.
  - a. Respondent shall make available to the monitor any and all records or access to the practice requested by the monitor, including on-site observation. The practice monitor shall visit Respondent's medical practice at each and every location, on a random unannounced basis at least monthly and shall examine a selection (no fewer than 20) of records maintained by Respondent, including patient records, prescribing information and office records. The review will determine whether the Respondent's medical practice is conducted in accordance with the generally accepted standards of professional medical care. Any perceived deviation of accepted standards of medical care or refusal to cooperate with the monitor shall be reported within 24 hours to OPMC.
  - Respondent shall be solely responsible for all expenses associated with monitoring, including fees, if any, to the monitoring physician.
  - Respondent shall cause the practice monitor to report quarterly, in writing, to the Director of OPMC.
  - d. Respondent shall maintain medical malpractice insurance coverage with limits no less than \$2 million per occurrence and \$6 million per policy year, in accordance with Section 230(18)(b) of the Public Health Law. Proof of coverage shall be submitted to the Director of OPMC prior to Respondent's practice after the effective date of this Order.
- 12. Respondent shall comply with this Consent Order and all its terms, and shall bear all associated compliance costs. Upon receiving evidence of noncompliance with, or a violation of, these terms, the Director of OPMC and/or the Board may initiate a violation of probation proceeding, and/or any other such proceeding authorized by law, against Respondent.